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## 10/550,767 Application Number **CHANGE OF** 9/27/2005 CORRESPONDENCE ADDRESS Filing Date Application Norman Byrna First Named Inventor 2833 Art Unit Address to: Commissioner for Patents **Examiner Name** P.O. Box 1450 Alexandria, VA 22313-1450 **Byme P232US1** Attorney Docket Number Please change the Correspondence Address for the above-identified patent application to: The address associated with Customer Number: 37190 OR Firm or Individual Name Address City State Zip Country Email Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent of record. Registration Number 29,324 Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Signature Typed or Printed Thomas L. Lockhart Name Telephone 616-336-6000 Date 4/24/07 NOTE: Signatures of all the inventors or assignces of record of the entire Interest or their representative(s) are required. Submit multiple

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